

<b>PATENT APPLICATION FEE DETERMINATION RECORD</b> Effective January 1, 2003					Application or Docket Number <i>10648609</i>
<b>CLAIMS AS FILED - PART I</b> (Column 1) (Column 2)					SMALL ENTITY TYPE <input type="checkbox"/> OR OTHER THAN SMALL ENTITY
TOTAL CLAIMS		<i>45</i>			
FOR		NUMBER FILED	NUMBER EXTRA		
TOTAL CHARGEABLE CLAIMS		<i>45</i> minus 20 =	<i>* 25</i>		
INDEPENDENT CLAIMS		<i>5</i> minus 3 =	<i>* 2</i>		
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>			
* If the difference in column 1 is less than zero, enter "0" in column 2					
<b>CLAIMS AS AMENDED - PART II</b> <i>H6/105</i> (Column 1) (Column 2) (Column 3)					SMALL ENTITY OR OTHER THAN SMALL ENTITY
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	<i>* 42</i>	Minus	<i>** 43</i>	=
	Independent	<i>* 3</i>	Minus	<i>*** 5</i>	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>			
RATE <input type="checkbox"/> OR RATE <input type="checkbox"/> X\$ 9= <input type="checkbox"/> X\$18= <input type="checkbox"/> X42= <input type="checkbox"/> X84= <input type="checkbox"/> +140= <input type="checkbox"/> +280= <input type="checkbox"/> TOTAL <input type="checkbox"/> OR TOTAL <input type="checkbox"/> <i>1368</i>					
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	<i>* </i>	Minus	<i>** </i>	=
	Independent	<i>* </i>	Minus	<i>*** </i>	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>			
RATE <input type="checkbox"/> OR RATE <input type="checkbox"/> X\$ 9= <input type="checkbox"/> X\$18= <input type="checkbox"/> X42= <input type="checkbox"/> X84= <input type="checkbox"/> +140= <input type="checkbox"/> +280= <input type="checkbox"/> TOTAL <input type="checkbox"/> OR TOTAL <input type="checkbox"/> <i>ADDITIONAL FEE</i>					
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	<i>* </i>	Minus	<i>** </i>	=
	Independent	<i>* </i>	Minus	<i>*** </i>	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>			
RATE <input type="checkbox"/> OR RATE <input type="checkbox"/> X\$ 9= <input type="checkbox"/> X\$18= <input type="checkbox"/> X42= <input type="checkbox"/> X84= <input type="checkbox"/> +140= <input type="checkbox"/> +280= <input type="checkbox"/> TOTAL <input type="checkbox"/> OR TOTAL <input type="checkbox"/> <i>ADDITIONAL FEE</i>					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.					